

the mere local disorder, that our remedies must be addressed. It is worse than useless to treat these incidental inflammations as ordinary idiopathic phlegmasiæ, and I cannot but believe that our main reliance in the treatment of all these morbid phenomena must be placed in the free exhibition of quinine, brandy, and turpentine.

*Spotted Fever.*—Dr. D. GILBERT said that he had listened to the reports read and remarks made with great interest. He had seen numerous cases during the last year in consultation, and had three cases in his own practice. He had been called to meet Drs. Service and Wilson, of Schuylkill Falls, when the disease first appeared there in Feb. 1863. He subsequently saw cases with Dr. Wm. Corson, of Norristown, and more recently with Dr. Senderling, of Richmond St., Dr. Cooper, of Arch St., Dr. Knight, of Vine St., in this city, and Dr. Knorr, of Kensington. These cases were all characterized by the symptoms which have been so well described this evening. A large majority of them terminated fatally in from twelve to seventy-two hours after the onset of the disease. Dr. G. stated that cases very similar, and probably identical with this terrible malady, had come under his observation at different periods within the last twenty years. He remembered two cases which occurred in Gettysburg, in the practice of the late Dr. C. N. Berlucchy, of that place, in 1844, or thereabout, in both of which there was sudden attack by chill, great depression of the vital powers, with cerebro-spinal complication, stupor, coma, and death, the first in twelve, and the second in sixty hours. Another case occurred about sixteen years ago in this city, in the practice of Dr. Fricke, in the person of an adult male, who died in ten hours after the first symptoms were observed. In this there was a *post-mortem* examination. The most remarkable condition developed was the spotted appearance of all the serous surfaces of the chest and abdomen. About three years ago he was requested to meet Dr. R. J. Levis, of this city, in consultation, in the case of a child aged about five years, in a family in Marshall St. Another child, aged about three years, in the same family, had just died, after some twelve hours' illness, and the case now under treatment was similarly attacked. In both, there was sudden seizure by chill, followed by imperfect reaction, delirium, stupor, sinking, and death. A few days afterwards a child in another branch of the same family, living in the same neighbourhood, was attacked, but there was a more perfect reaction after the chill. The disease first seemed to localize itself upon the viscera of the chest, then of the abdomen, and finally on the cerebro-spinal region. The eruption appeared indistinctly on the third day. The general suffering was intense; there was soreness in all parts of the body, and the writhing and irrepressible contortions of the body and limbs were frightful. This case recovered. These cases occurring sporadically, and prior to the late epidemic, could not be classified with any of the commonly known diseases, and were considered by all the medical gentlemen who saw them as rare and anomalous.

Of the cases which Dr. G. had in his own practice since the first outbreak of the epidemic in the suburban districts of this city, the first occurred in March, 1863. The patient, aged about thirty-four years, is an attorney of high position in this city. The attack was characterized by the usual symptoms, the spots appearing on the second day. The delirium was present during the night, and the pain in the head and extremities was intense, without any intermission. In this case, the stupor and coma were not so profound as they are usually met with in the more violent cases. After reaction was fully established, to relieve the cerebro-spinal

distress, twenty leeches were applied to the nape of the neck, which afforded marked relief, and then large doses of sulphate of quinia were given, which were followed by a speedy amelioration of the symptoms. Convalescence was protracted, however, and final and complete recovery did not take place until two months had elapsed.

As the Board of Health was then, through its sanitary committee, investigating the cause and nature of the epidemic at Schuylkill Falls and Frankford, Dr. G. invited Dr. R. La Roche, the chairman of that committee, to see this case with him. Dr. La Roche at once declared it to be a genuine case of spotted fever.

The second case occurred in the person of a clergyman of this city, aged about thirty years. He had a severe chill on the evening of the 27th of Dec. last. In this case numerous spots appeared on the face, body, and extremities, on the second day. Quinine, in full doses, constituted the principal feature of the treatment, and in ten days he was so much better, that it was thought safe to allow some of his friends to see him. The quinine was discontinued, and the elixir cinchona given instead, but the fever returned, and recourse was again had to the quinine with renewed beneficial results. Since then there were two other slight relapses, attributable to over-exertion and exposure, and, as Dr. G. had reason to believe, in part to the omission of the quinine. His convalescence thus interrupted has even now not resulted in the establishment of full health, although more than ten weeks have elapsed since the attack commenced.

The third case, previously a fine healthy boy, aged seven years, was suddenly taken with chill on the morning of the 14th of Feb. ult. at the Mount Vernon Hotel of this city. His mother, an intelligent lady, gave him warm drinks, and made warm applications to his extremities. After reaction and fever, she applied cold to his head, and sinapisms to his feet and nape of neck, and gave him a table-spoonful of syrup of rhubarb. He passed a restless night, but in the morning was more comfortable. Towards the middle of the day he became worse, and at 2 P. M. had a slight attack of convulsions. When this subsided, he appeared to be in a dying state, and then Dr. G. was hastily summoned for the first time. His mother stated to Dr. G. that from the first he complained of intense pain of the head and limbs, that during the night he was delirious, and constantly called for drink. She gave him a second dose of rhubarb during the night, which had operated in the morning once. Dr. G. found him in a state of extreme prostration, the pulse could scarcely be felt, the skin was cold, pupils dilated, and the stupor was so profound that he could be roused with difficulty. There was a livid red spot on the upper lid of the left eye, about three lines in diameter, a larger one on the right cheek near the mouth, and quite a number of the same and smaller size on his buttocks and shoulders, and a few on his back and abdomen. None of these could be made to disappear by pressure. Gave him strong brandy and water in teaspoonful doses every few minutes, until egg-nog could be prepared, which was ordered to be given freely until reaction occurred. As there was great irritability of stomach, sinapisms were applied to the epigastrium, and also to the extremities. Sulphate of quinia in grs. iiss every half hour was prescribed, first in solution, but being rejected, it was given in the same dose in sugar-coated pills. Saw him again at 6½ P. M., and found great improvement. His pulse filled, and about 100 in the minute, his skin warm, and more elastic, his breathing fuller, stupor diminished, and intelligence improved. He had taken freely of the egg-nog, which, as well as the pills, was retained. Ordered the quinine to be continued, giving one pill every hour, and gave

cream and sol. of gum Arabic, instead of the egg-nog. He had two small evacuations from his bowels during the afternoon, produced by the syrup of rhubarb given the evening before. At 9½ o'clock found him very feverish, with increased action of the heart and arteries, jactitation, and delirium. Directed cold to his head, gum Arabic solution only for drink during the night, and to continue the quinine.

16th, 8 A. M. Spent a restless night, drank largely of the solution, and vomited several times. Had taken the pills regularly, but several were rejected after they were taken. Allowing for losses, Dr. G. supposed that at least forty grains of quinine were retained up to this period. Pulse 104; intelligence improved. Ordered elixir cinchona ʒij, tr. opii acet. gtt. xxxij. S. A teaspoonful to be given every four hours. Quinine to be omitted, and nutritious diet to be given. Next day, 17th, his condition was decidedly more unfavourable. Pulse 130, delirium increased, great irritation about the head and face, so that he abraded the cuticle until the blood flowed freely. His head was thrown violently back by the contractions of the posterior cervical muscles, and his pupils were largely dilated. A blister was applied to the nape of the neck, and the quinine resumed in 2½ grain doses every two hours. This was followed by a gradual amelioration of all the symptoms from day to day, until now—sixteen days from the commencement of the attack—he may be said to be convalescent.

Dr. G.'s object, more particularly, in bringing these cases to the notice of the College, which he does merely from memory, is to show that, in his opinion, large doses of quinine have been the chief means in bringing these cases to a favourable termination, thus corroborating the experience of his friend Dr. Levick, as given to the College this evening. In confirmation of the value of stimulation and large doses of quinine he added that, when on a visit to Davenport, Iowa, last June, he was informed by Dr. J. M. Adler, who, in addition to an extensive general practice, has charge of the military hospitals there, that he had a number of cases of spotted fever during the latter part of last winter, and that he saved nearly all his cases after he adopted this treatment. In one case, that of his hospital steward, he gave ʒss doses every half hour until ʒij were taken, and although the case when he first saw it was one of the most unpromising he had seen, yet the patient recovered under this treatment. Several months ago, in consultation with Dr. Senderling, of Port Richmond, Dr. G. mentioned this treatment to him, and advised him to adopt it, as the disease was then prevailing there. On a recent occasion, Dr. S. informed him that he had taken the advice, and was convinced that it had been the means of saving several cases. Dr. G. stated that in his cases, whenever the quinine was omitted before the disease was entirely subdued, it returned, and could only be controlled by resuming the use of the quinia. This was particularly shown in his last two cases. In all there were present irritability of the stomach and torpor of the bowels. The spots appeared on the second day, and faded away at the end of the first week. In all there was evidence of more or less grave cerebro-spinal complication, and in no case was there any evidence of the disease spreading from contagion. Leeches in some cases and blisters were useful to nape of neck, but opiates increased the stupor and insensibility.

Dr. STILLÉ referred to a case which he had visited in consultation, and which did not prove fatal until the nineteenth day. In this case, the amelioration of the primary attack and an apparent convalescence appeared to be attributable to the administration of sulphate of quinia in full doses.